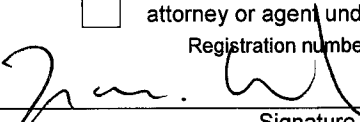


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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 030048094US	
Application Number <div></div> 10/671,435-Conf. #2918		Filed <div></div> September 24, 2003	
For AIRPLANE WITH UNSWEPT SLOTTED CRUISE WING AIRFOIL			
Art Unit <div></div> 3643		Examiner <div></div> R. P. Swiatek	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$130	\$65 \$ 130.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175 \$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by EFT Account No. SEA1PIRM. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiency in fees or credit any overpayment, to Deposit Account Number <u>50-0665</u> . WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,216</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 _____ Signature John M. Wechkin _____ Typed or printed name		<u>June 19, 2008</u> _____ Date (206) 359-8000 _____ Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			